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CONFIRMATION NO. 6574

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/031,607	<b>FILING OR 371(c) DATE</b> 06/12/2002 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> 2786-0199P
<b>APPLICANTS</b> Kinneret Savitzky, Tel Aviv, ISRAEL; Rami Khosravi, Herzilya, ISRAEL; Menashe Elazar, Mevaseret Zion, ISRAEL;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL00/00427 07/19/2000				
<b>** FOREIGN APPLICATIONS *****</b> ISRAEL 130989 07/20/1999				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 25	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 2292				
<b>TITLE</b> SPLICE VARIANTS OF CD40-RECEPTOR				
<b>FILING FEE RECEIVED</b> 582	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	